

Electronic Filing System (EFS) Data  
Electronic Patent Application Submission  
USPTO Use Only

EFS ID: 19295  
Application ID: 10065546  
Title of Invention: SYSTEM AND METHOD FOR  
ALLOCATING COMPUTING  
RESOURCES  
First Named Inventor: Steven Neiman  
Domestic/Foreign Application: Domestic Application  
Filing Date: null  
Effective Receipt Date: 2002-10-29  
Submission Type: Utility Patent Filing  
Filing Type: new-utility  
Confirmation Number: 0  
Attorney Docket Number: 36287-03400  
Digital Certificate Holder: cn=Chris Lansing Holm, ou=Registered Attorneys, ou=Patent and  
Trademark Office, ou=Department of Commerce, o=U.S.  
Government, c=US  
Certificate Message Digest: RjwGbkRDajE5K1a7Z6qWww==  
Total Fees Authorized: \$1806.0  
Payment Category: DA - Deposit Account  
Deposit Account Number: 133250  
Deposit Account Name: Chris L. Holm



# TRANSMITTAL FORM

Electronic Version 1.0.3

Stylesheet Version: 1.0

Submission Type: Utility Patent  
Filing

Attorney Docket  
Number:

36287-  
03400



## SYSTEM AND METHOD FOR ALLOCATING COMPUTING RESOURCES

First Named Inventor: Steven Neiman

### SUBMITTED BY

Name:	Chris L. Holm
Registration Number:	39227
Electronic Signature Mark: Chris L. Holm	Date Signed: 20021029
Name:	Christopher J. Gaspar
Registration Number:	41030
Electronic Signature Mark: Christopher J. Gaspar	Date Signed: 20021029

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03400

**Attached Files:**

declaration	03400_decl_1.TIF
declaration	03400_decl_2.TIF
bid-transmittal	03400apds.xml
patent-assignments	03400asgn.xml
fee-transmittal	03400fee.xml
specification	03400.xml

**Attached Image File(s):**

03400\_decl\_1.TIF  
03400\_decl\_2.TIF



<b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION</b> <b>(37 CFR 1.63)</b>  <input checked="" type="checkbox"/> Declaration Submitted With Initial Filing    OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Attorney Docket Number	36287-03400
	First Named Inventor	Steven NEIMAN
	<b>COMPLETE IF KNOWN</b>	
	Application Number	TBA/
	Filing Date	Herewith
	Group Art Unit	TBA
Examiner Name	TBA	

**As a below named inventor, I hereby declare that:**

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**SYSTEM AND METHOD FOR ALLOCATING COMPUTING RESOURCES**

the specification of which (Title of the Invention)

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY)  as United States Application Number or PCT International Application Number  and was amended on (MM/DD/YYYY)  (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY) Country	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

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Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

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## DECLARATION — Utility or Design Patent Application

Direct all correspondence to:		<input checked="" type="checkbox"/> Customer Number or Bar Code Label	27171	OR	<input type="checkbox"/> Correspondence address below
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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.					
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name <span style="float: right;">Steven</span> (first and middle (if any))			Family Name <span style="float: right;">NEIMAN</span> or Surname		
Inventor's Signature				Date	
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51 Potter Avenue		Citizenship			
Mailing Address					
State/Island		NY		10314	
City		State		Country	
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name <span style="float: right;">Roman</span> (first and middle (if any))			Family Name <span style="float: right;">SULZHYK</span> or Surname		
Inventor's Signature				Date	
New York		NY		US	
Residence: City		State		Country	
235 West 48th Street, #19A		Citizenship			
Mailing Address					
New York		NY		10036	
City		State		Country	
<input type="checkbox"/> Additional Inventors are being named on the supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.					

[Page 2 of 2]

# FEE TRANSMITTAL

Electronic Version 1.1.0

Stylesheet Version: 1.0

*Patent fees are subject to annual revisions on or about October 1st of each year.*

Large Entity

**TOTAL FEES AUTHORIZED: \$ 1 806**

The commissioner is hereby authorized to charge indicated processing and/or publication fees and credit any overpayments to:

Deposit Account Number: 13-3250  
Deposit Account Name: Milbank Tweed



Charge Any Additional Fee Required Under 37 C.F.R. Sections 1.16 and 1.17.

## SUBMITTED BY

Authorized Name: Chris L. Holm  
Electronic Signature Mark: Chris L. Holm  
Date Signed: 20021029

## BASIC FILING FEE

Fee Description	Fee Code	Fee Paid
Utility Filing Fee	1001	\$ 740

Subtotal For Basic Filing Fee: \$ 740

## EXTRA CLAIM FEES

	Fee Code	Fee	Extra Claims	Fee Paid
Total Claims: 77	1202	\$ 18	57	\$ 1026
Independent Claims: 3	1201	\$ 84	0	\$ 0

Subtotal For Extra Claims Fees: \$ 1026

[illegible]

*(continued)*

[illegible]